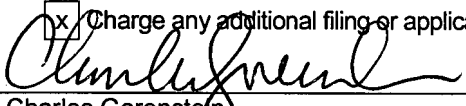




MS AF
REPLY UNDER 37 C.F.R. § 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP

AF
IFW

AMENDMENT TRANSMITTAL LETTER				Docket No. 1247-0521P	
Application No. 10/631,844-Conf. #1040	Filing Date August 1, 2003	Examiner M. Sabouri	Art Unit 2617		
Applicant(s): Kazutaka OKUZAKO et al.					
Invention: PORTABLE INFORMATION PROCESSING APPARATUS					
MS AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	69	- 71 =	0	x 50.00	0.00
Independent Claims	6	- 3 =	3	x 200.00	600.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within second month					450.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					1,050.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input checked="" type="checkbox"/> Please charge Deposit Account No. <u>02-2448</u> in the amount of \$ <u>1,050.00</u> . A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Charles Gorenstein Attorney Reg. No. 29,271				Dated: <u>June 25, 2007</u>	
BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8000					

CG/EJW/mpe



PTO/SB/17 (06-07)

Approved for use through 06/30/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2007		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/631,844-Conf. #1040
TOTAL AMOUNT OF PAYMENT (\$) 1,050.00		Filing Date	August 1, 2003
		First Named Inventor	Kazutaka OKUZAKO
		Examiner Name	M. Sabouri
		Art Unit	2617
		Attorney Docket No.	1247-0521P

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch & Birch, LLP</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
Fee Description						Small Entity Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)		Multiple Dependent Claims		
69	- 71 = 0	x 50.00 =	0.00		Fee (\$)	Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)				
6	- 3 = 3	x 200.00 =	600.00				
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)		
_____	- 100 = _____	/ 50 = _____ (round up to a whole number) x _____		= _____			
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)						Fees Paid (\$)	
Other (e.g., late filing surcharge): 1252 Extension for response within second month						450.00	

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	29,271
Name (Print/Type)	Charles Gorenstein	Telephone	(703) 205-8000
		Date	June 25, 2007